

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			5399
O.I.P.E. CLASSIFIER			53-5-40
FORMALITY REVIEW	HF	70556	5-13-99
	HF	70556	4-3-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	05 24 01
2	✓	✓	05 24 01
3	✓	✓	05 24 01
4	✓	✓	05 24 01
5	✓	✓	05 24 01
6	✓	✓	05 24 01
7	✓	✓	05 24 01
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9	✓	✓	05 24 01
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46	✓	✓	05 24 01
47	✓	✓	05 24 01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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